

AMENDED IN SENATE JULY 17, 2007

AMENDED IN SENATE JULY 3, 2007

AMENDED IN ASSEMBLY APRIL 18, 2007

CALIFORNIA LEGISLATURE—2007–08 REGULAR SESSION

**ASSEMBLY BILL**

**No. 1339**

**Introduced by Assembly Member Torrico**

*(Principal coauthor: Senator Florez)*

*(Coauthors: Senators Alquist, Cedillo, and Kuehl)*

February 23, 2007

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An act to amend Sections 4369.1, 4369.2, and 4369.3 of, ~~to add~~  
~~Section 4369.5 to,~~ and to repeal *and add* Section 4369.4 of, the Welfare  
and Institutions Code, relating to problem and pathological gambling.

LEGISLATIVE COUNSEL'S DIGEST

AB 1339, as amended, Torrico. Problem and pathological gambling.

Existing law establishes the Office of Problem and Pathological Gambling within the State Department of Alcohol and Drugs Programs for the purpose of developing a problem gambling prevention program, including, but not limited to, a public awareness campaign, and requires the office to develop a statewide plan to address problem and pathological gambling.

This bill would specify the programs to be included in the plan, would require the plan to serve as the state's strategic plan for the prevention, intervention, ~~and detection,~~ treatment, *and research* of problem and pathological gambling behaviors, and would require that the plan be updated periodically, at the discretion of the office.

This bill would establish the Problem and Pathological Gambling Advisory Board and would set forth its advisory duties. The bill would

require the office to revise its strategic plan, as necessary, and to deliver it to the Governor and the Legislature by ~~January~~ July 1, 2009.

Vote: majority. Appropriation: no. Fiscal committee: yes.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

1 SECTION 1. Section 4369.1 of the Welfare and Institutions  
2 Code is amended to read:

3 4369.1. As used in this chapter, the following definitions shall  
4 apply:

5 (a) “Department” means the State Department of Alcohol and  
6 Drug Programs.

7 (b) “Director” means the director of the department.

8 (c) “Office” means the Office of Problem and Pathological  
9 Gambling.

10 (d) “Pathological gambling disorder” means a progressive  
11 mental disorder meeting the diagnostic criteria set forth by the  
12 American Psychiatric Association’s Diagnostic and Statistical  
13 Manual, Fourth Edition.

14 (e) “Problem gambling” means participation in any form of  
15 gambling to the extent that it creates a negative consequence to  
16 the gambler, the gambler’s family, place of employment, or  
17 community. This includes patterns of gambling and subsequent  
18 related behaviors that compromise, disrupt, or damage personal,  
19 family, educational, financial, or vocational interests. The problem  
20 gambler does not meet the diagnostic criteria for pathological  
21 gambling disorder.

22 (f) “Problem gambling prevention programs” means programs  
23 designed to reduce the prevalence of problem and pathological  
24 gambling among California residents. These programs ~~shall~~  
25 include, but are not limited to, public education and awareness,  
26 outreach to high-risk populations, early identification, ~~responsible~~  
27 ~~gambling, problem gambling treatment, and problem gambling~~  
28 ~~consumer protection programs.~~

29 ~~(g) “Problem gambling consumer protection programs” means~~  
30 ~~protections, including, but not limited to, self-exclusion programs~~  
31 ~~responsible gambling, and consumer protection programs, such~~  
32 ~~as self-exclusion programs for patrons, programs recommending~~  
33 ~~socially responsible manners of advertising, policies for locating~~

1 responsible gambling information and material in conspicuous  
2 locations, and policies regarding the location of automated teller  
3 machines (ATM) in casinos.

4 ~~(h)~~

5 (g) “Advisory board” means the Problem and Pathological  
6 Gambling Advisory Board established pursuant to Section ~~4369.5~~  
7 ~~4369.4~~.

8 ~~(i)~~

9 (h) “Problem gambling treatment ~~services~~” *programs*” means  
10 programs that provide direct treatment services to the problem and  
11 pathological gambler and directly involve family members to  
12 ~~reduce or eliminate addictive problem and pathological gambling~~  
13 ~~behavior.~~ *gambler to reduce or eliminate addictive problem and*  
14 *pathological gambling behaviors. These programs may directly*  
15 *involve family members or may include early intervention strategies*  
16 *designed for the at-risk gambler.*

17 (j) “Strategic plan” means a comprehensive strategy for the  
18 research of, and the prevention, detection, intervention, treatment,  
19 and elimination of, pathological and problem gambling.

20 (k) “Early intervention” means a limited-term strategy offered  
21 with the aim of assisting an individual to prevent, reduce, or end  
22 problem and pathological gambling behavior. Early intervention  
23 services may be provided in person, by telephone, online, by  
24 printed materials, or by a combination of these activities designed  
25 for the “at-risk” gambler and are the least restrictive form of  
26 services.

27 SEC. 2. Section 4369.2 of the Welfare and Institutions Code  
28 is amended to read:

29 ~~4369.2. (a) The office, in consultation with the advisory board,~~  
30 ~~shall develop a problem and pathological gambling prevention~~  
31 ~~program, which shall be the first priority for funding appropriated~~  
32 ~~to this office. The prevention program shall be based upon the~~

33 *4369.2. (a) The office shall develop a problem and*  
34 *pathological gambling prevention program. The prevention*  
35 *program shall be based upon the allocation priorities established*  
36 *by the department pursuant to the strategic plan and subject to*  
37 *funding being appropriated for the purpose of this subdivision,*  
38 *and shall consist of all of the following:*

39 (1) A multilingual toll-free telephone service for immediate  
40 crisis management and containment with subsequent referral of

1 problem and pathological gamblers to health providers who can  
2 provide treatment for gambling related problems and to self-help  
3 groups.

4 (2) Public awareness campaigns that focus on prevention and  
5 education among ~~vulnerable~~ *at-risk* populations and the general  
6 public including, for example, dissemination of ~~youth-oriented~~  
7 ~~preventive literature, educational experiences, outreach programs,~~  
8 ~~and public service announcements in the media. Outreach programs~~  
9 ~~may include, but are not limited to, telephone sessions preparing~~  
10 ~~the client or the family members for treatment, face-to-face sessions~~  
11 ~~educating family members on their role in recovery, psychosocial~~  
12 ~~support for family members, and psychoeducational sessions for~~  
13 ~~the client and family. *youth-oriented preventative literature,*~~  
14 ~~*educational experiences, outreach programs, and public service*~~  
15 ~~*announcements in the media.*~~

16 (3) Empirically driven research programs focusing on  
17 epidemiology/prevalence, etiology/causation, and best practices  
18 ~~in prevention and treatment. Research programs shall be designed~~  
19 ~~to continually identify the most effective methods of preventing~~  
20 ~~and treating gambling addiction and programs that monitor the~~  
21 ~~impact of gambling activities and the effectiveness of the~~  
22 ~~prevention and treatment programs. These programs shall include~~  
23 ~~quality research projects that provide recommendations to~~  
24 ~~incorporate the results of research into the strategic plan in a timely~~  
25 ~~and effective manner. Pertinent studies shall seek to include short-~~  
26 ~~*in prevention and treatment. Pertinent studies shall seek to include*~~  
27 ~~*short-*~~ and long-term studies and longitudinal studies for a smaller  
28 percentage of the client population to measure the impact and  
29 efficacy of treatment services over an extended period of time.

30 (4) Training of health care professionals and educators, and  
31 training for law enforcement agencies and nonprofit organizations  
32 in the identification of problem and pathological gambling behavior  
33 and knowledge of referral services and treatment programs.

34 (5) Training of gambling industry personnel in identifying  
35 customers at risk for problem and pathological gambling and  
36 knowledge of referral and treatment services.

37 (b) (1) The office shall develop a program to support treatment  
38 services for California residents with problem and pathological  
39 gambling issues. The program shall be based upon the allocation  
40 priorities established by the department pursuant to the strategic

1 plan and subject to funding being appropriated for the purposes  
2 of this subdivision. These priorities shall also be based on the best  
3 available existing state programs as well as on continuing research  
4 into best practices and on the needs of California. The treatment  
5 program shall consist of all of the following components:

6 (A) Treatment services for problem and pathological gamblers  
7 and directly involved family members. These treatment services  
8 shall be created through partnerships with established ~~health~~  
9 ~~facilities~~ *entities* that demonstrate the ability and capacity to  
10 provide evidence-based and culturally competent treatment for  
11 gambling related problems, ~~substance abuse facilities, and~~  
12 ~~providers~~. State funded treatment may include, but is not limited  
13 to, the following: self-administered, home-based educational  
14 programs; outpatient treatment; residential treatment; and inpatient  
15 treatment when medically necessary.

16 (B) A funding allocation methodology that ensures treatment  
17 services are delivered efficiently and effectively to areas of the  
18 state most in need.

19 (C) Appropriate review and monitoring of treatment programs  
20 by the director of the office, in consultation with the advisory board  
21 or an institution designated by the director that shall have  
22 demonstrated the ability to evaluate treatment programs. The  
23 evaluation shall include grant oversight and monitoring, standards  
24 for treatment, and outcome monitoring.

25 (D) Treatment efforts shall provide services that are relevant to  
26 the needs of a diverse multicultural population with attention to  
27 groups with unique needs, including female gamblers, underserved  
28 ethnic groups, the elderly, youth, young adults, and the physically  
29 challenged.

30 (2) ~~(A)~~ Problem gambling treatment programs shall utilize  
31 existing gambling treatment service providers as well as expanding  
32 the role of some of the existing substance-abuse treatment agencies  
33 and other qualified disciplines, community-based organizations,  
34 and other entities, who demonstrate the ability and capacity to  
35 provide evidence-based and culturally competent treatment  
36 services.

37 ~~(B) These programs may include treatment services to problem~~  
38 ~~and pathological gamblers, their spouses and family, programs for~~  
39 ~~special populations such as women, seniors, youth, young adults,~~

1 and underserved ethnic groups, and programs for treating multiple  
2 addictions.

3 ~~(C) Outpatient treatment approaches may include~~  
4 ~~cognitive-behavioral therapy, motivational interviewing, relapse~~  
5 ~~prevention, psychodynamic therapy, and supportive psychotherapy.~~

6 ~~(D) Case management functions may include maintaining a~~  
7 ~~centralized, systematic screening, assessment, coordination, and~~  
8 ~~tracking of services and outcomes.~~

9 ~~(E) The programs may also include inpatient treatment and~~  
10 ~~rehabilitation services for residents in a temporary or permanent~~  
11 ~~residential setting for chemical dependency, mental health, or~~  
12 ~~domestic violence who demonstrate the ability and capacity to~~  
13 ~~provide evidence-based and culturally competent services for~~  
14 ~~clients with cooccurring disorders.~~

15 (c) The office shall make information available as requested by  
16 the Governor and the Legislature with respect to the comprehensive  
17 program.

18 (d) The office shall revise its strategic plan as necessary and as  
19 directed by this chapter and deliver the plan to the Governor and  
20 to the relevant fiscal and policy committees of the Legislature, by  
21 ~~January~~ July 1, 2009.

22 SEC. 3. Section 4369.3 of the Welfare and Institutions Code  
23 is amended to read:

24 4369.3. (a) In designing and developing the overall program,  
25 the office, in consultation with the advisory board, shall do all of  
26 the following:

27 (1) Develop a statewide plan to address problem and  
28 pathological gambling. The statewide plan shall serve as the state's  
29 strategic plan for the prevention, *detection*, intervention, treatment,  
30 and research of problem and pathological gambling behaviors.  
31 The statewide plan shall be updated periodically, at the discretion  
32 of the office, as goals are accomplished or modified, or as  
33 additional funding or information becomes available.

34 (2) Adopt any regulations necessary to administer the program.

35 (3) Develop priorities for funding services and criteria for  
36 distributing program funds.

37 (4) Monitor the expenditures of state funds by agencies and  
38 organizations receiving program funding.

39 (5) Evaluate the effectiveness of services provided through the  
40 program.

1 (6) Pursue policy changes and funding requests to achieve the  
2 goals and objectives of the strategic plan.

3 (7) Evaluate annual program funding needs consistent with the  
4 strategic plan, and develop an equitable funding request from all  
5 gaming interests throughout California.

6 (8) Coordinate and work with any other agency that regulates  
7 casino gambling or cardrooms within the state or other entities  
8 involved in gambling and the treatment of problem and  
9 pathological gamblers.

10 (b) Notwithstanding any other provision of law, any contracts  
11 required to meet the requirements of this chapter are exempt from  
12 the requirements contained in the Public Contract Code and the  
13 State Administrative Manual, and are exempt from the approval  
14 of the Department of General Services.

15 (c) The first and highest priority of the office with respect to  
16 the use of any funds appropriated for the purposes of this chapter  
17 shall be to carry out paragraph (1) of subdivision (a).

18 (d) Administrative costs for the program may not exceed 10  
19 percent of the total funding budgeted for the program.

20 SEC. 4. Section 4369.4 of the Welfare and Institutions Code  
21 is repealed.

22 SEC. 5. Section ~~4369.5~~ 4369.4 is added to the Welfare and  
23 Institutions Code, to read:

24 ~~4369.5.~~

25 4369.4. (a) The Problem and Pathological Gambling Advisory  
26 Board is hereby established, consisting of ~~29~~ 19 members as  
27 follows:

28 (1) Director of the department, or his or her designee, who shall  
29 serve as the chair.

30 (2) Director of the Division of Addiction and Recovery Services  
31 within the Department of Corrections and Rehabilitation, or his  
32 or her designee.

33 ~~(3) Director of the California Youth Authority, or his or her~~  
34 ~~designee.~~

35 ~~(4)~~

36 (3) Director of Mental Health, or his or her designee.

37 ~~(5) Director of Health Care Services, or his or her designee.~~

38 ~~(6)~~

39 (4) Director of Finance, or his or her designee.

40 ~~(7)~~

(5) Executive Director of the California Horse Racing Board, or his or her designee.

~~(8)~~

(6) Executive Director of the California Gambling Control Commission, or his or her designee.

~~(9)~~

(7) Director of the Division of Gambling Control within the Department of Justice, or his or her designee.

~~(10)~~

(8) Director of the California State Lottery Commission, or his or her designee.

~~(11) A total of six representatives from gambling-related, mental health, and substance abuse treatment service providers appointed by the director, with two representatives each from gambling related, mental health-related, or substance health-related treatment providers.~~

*(9) Three representatives appointed by the director, one each representing a gambling-related, mental health-related, and substance abuse treatment provider.*

~~(12) Five~~

*(10) Three* representatives from the gambling industry, one appointed by the Senate Committee on Rules, one appointed by the Speaker of the Assembly, and ~~three~~ *one* appointed by the director.

~~(13) Two representatives from local government, one appointed by the Senate Committee on Rules and one appointed by the Speaker of the Assembly.~~

~~(14) Two representatives~~

*(11) One representative* of academia that ~~have~~ *has* a specialty in ~~addiction research, one appointed by the Speaker of the Assembly and one appointed by the director.~~ *addiction research.*

~~(15) Two consumers of problem gambling treatment services, one appointed by the Senate Committee on Rules and one appointed by the director.~~

~~(16) Two~~

*(12) Four* representatives of the Legislature, ~~one two~~ appointed by the President pro Tempore of the Senate and ~~one two~~ appointed by the Speaker of the Assembly.

(b) The director shall make appointments to the advisory board ~~by June 30~~ *July 1, 2008.*



- 1 (c) The director shall convene the advisory board at least once
- 2 every 3 months, or more frequently as needed.
- 3 ~~(d) Membership of the advisory board shall not exceed a~~
- 4 ~~representation of more than 25 percent from the gambling industry.~~
- 5 ~~(e)~~
- 6 (d) The advisory board may establish subcommittees to examine
- 7 in more detail issues related to problem and pathological gambling.

O